

State of Washington Avaler Right
Please follow the attached instructions to avoid unnecessary delays.

For Ecology Use Fee Paid 355.56 Date 1-4-2006

Section 1. APPLICANT - PERSON, ORGA	NIZATION, OR WATER SYSTEM							
Name: City of Chewelah	Home Tel:()							
Mailing Address P.O. Box 258	Work Tel: (509) 935-8311							
City Chewelah State WA Zip+4_99	109+FAX:(<u>509</u>)							
Section 2. CONTACT - PERSON TO CAL ☐ Same as above	L ABOUT THE APPLICATION							
Name Robin Hegney	Home Tel:()							
Mailing Address P.O. Box 258	Work Tel:(<u>509</u>) <u>935</u> - <u>7347</u>							
City <u>Chewelah</u> State <u>WA</u> Zip+4 99	109 + FAX:() -							
Relationship to applicant <u>Water/Waste Water Superintend</u>	dent for City of Chewelah							
Section 3. STATEMENT OF INTENT (3.57cfs) The applicant requests a permit to use not more than1600_ (additional) (\(\begin{align*} \begin{align*} \text{gallons per minute or } \\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \								
IESTIDEACE WATED	ICCDOLINDWATED							
If SURFACE WATER	If GROUNDWATER							
Name the water source and indicate if stream, spring, lake, etc. If unnamed, write "unnamed spring,"	A permit is desired for 5 well(s).							
"unnamed stream," etc.: Number of diversions:N/A	Well #1 – Alm Lane 1, Well #2 – Alm Lane 2, Well #3 – Alm Lane 3, Well #4 Stevens Street, and Well #10 – New Well							
Source flows into (name of body of water): N/A	Size & depth of well(s):							
	Well #1: 12" diameter, 362' depth (well ID #AHJ355) Well #2: 16" diameter, 390' depth (well ID #AHJ356)							
	Well #3: 14" diameter, 350-400' depth (well ID #AHJ357) Well #4: 12" diameter, 175' depth (well ID #AHJ360)							

Well #10: New well to be drilled

LOCATION

10

Enter the north-south and east-west distances in feet from the point of diversion or withdrawal to the nearest section corner: Well #1) Alm Lane 1 (G3-01134C): 60 feet north and 200 feet west of the SE corner of Sec. 15; Well #2) Alm Lane 2 (G3-24873C): 50 feet north and 200 feet west of the SE corner of Sec. 15; Well #3) Alm Lane 3 (G3-24873C): 40 feet north and 200 feet west of the SE corner of Sec. 15; Well #4) Stevens Street (G3-24873C): 2580 feet north and 1020 feet west of the SE corner of Sec. 14; Well #10) New well, location to be determined.

½ of	1/4 of	Section	Township	Range(E/W)	County	If location of source is platted, complete below:			
						Lot	Block	Subdivision	
SE	SE	15	32N	40EWM	Stevens				
SE	SE	15	32N	40EWM	Stevens				
SE	SE	15	32N	40EWM	Stevens				
NE	SW	14	32N	40EWM	Stevens				
NW	SE	11	32N	40EWM	Stevens			1	

For Ecology Use Date Rec	eived: Jan. 4, 2006	Priority Date: 1-4-20	006	
SEPA: Exempt Not Exempt	FERC License #_	Dept. Of Health #		
Date Accepted As Complete	4-14-2006 By 1	Date Returned	ByW	ria: <u>59</u>

Appl. No.: <u>G3-30507</u>

Sec	tion 5. GENERAL WATER SYSTEM INFORMATION						
A.	Name of system, if named: <u>City of Chewelah – South DOH ID No. 1257B</u>						
B.	Briefly describe your proposed water system.						
	Increase the available supply for the existing service area served by the City of Chewelah and to supply the Growth Management area around the City of Chewelah.						
C.	Do you already have any water rights or claims associated with this property or system? ■ YES □ NO PROVIDE DOCUMENTATION.						
	tion 6. DOMESTIC / PUBLIC WATER SUPPLY SYSTEM INFORMATION impleted for all domestic/public supply uses.)						
A.	Number of "connections" requested: 1250 Type of connection Municipal use (Homes, Apartment, Recreational, etc.)						
В.	Are you within the area of an approved water system? If yes, explain why you are unable to connect to the system. <i>Note: Regional water systems are identified by your County Health Department.</i> This request is to serve the existing service areas and areas the City of Chewelah has committed to serve in the future.						
Com	plete C. and D. only if the proposed water system will have fifteen or more connections.						
C.	Do you have a current water system plan approved by the Washington State Department of Health? If yes, when was it approved? 2002 Please attach the current approved version of your plan.						
D.	Do you have an approved conservation plan? If yes, when was it approved?2002 Please attach the current approved version of your plan.						
	tion 7. IRRIGATION/AGRICULTURAL/FARM INFORMATION mplete for all irrigation and agriculture uses.)						
A. B.	Total number of acres to be irrigated: _N/A List total number of acres for other specified agricultural uses: Use Acres Use Acres Use Acres						
C.	Total number of acres to be covered by this application:						
D.	Family Farm Act (Initiative Measure Number 59, November 3, 1977, as amended by Chapter 237, Laws of 2001) Add up the acreage in which you have a controlling interest, including only: ‡ Acreage irrigated under water rights acquired after December 8, 1977; ‡ Acreage proposed to be irrigated under this application; ‡ Acreage proposed to be irrigated under other pending application(s).						
	 Is the combined acreage greater than 6000 acres? Do you have a controlling interest in a Family Farm Development Permit? If yes, enter permit no: 						
E.	Farm uses: Stockwater - Total # of animals Animal type (If dairy cattle, see below) Dairy - # Milking # Non-milking						

Section 8. WATER STORAGE

Will you be using a dam, dike, or other structure to retain or store water?

☐ YES ☒ NO

NOTE: If you will be storing 10 acre-feet or more of water and/or if the water depth will be 10 feet or more at the deepest point, and some portion of the storage will be above grade, you must also apply for a reservoir permit. You can get a reservoir permit application from the Department of Ecology.

Section 9. DRIVING DIRECTIONS

Provide detailed driving instructions to the project site.

Drive North on Highway 395 from Spokane to Chewelah. Turn right on Clay Street (one block North of the traffic light). Proceed two blocks, turn left into the City Hall parking lot.

Section 10. REQUIRED MAP

A. Attach a map of the project. Attached (City's Water Plan

Section 11. PROPERTY OWNERSHIP

Landowner for place of use (if same as applicant, write "same")

A.	Does the applicant own the land on which the water will be used? If no, explain the applicant's interest in the place of use and provide the name(s) and address(es) of the owner(s):
	The water is to be used for municipal supply.
В.	Does the applicant own the land on which the water source is located? ✓ YES □ NO If no, submit a copy of agreement:
to pi mon	rtify that the information above is true and accurate to the best of my knowledge. I understand that in order rocess my application, I grant staff from the Department of Ecology access to the site for inspection and nitoring purposes. Even though I may have been assisted in the preparation of the above application by the bloyees of the Department of Ecology, all responsibility for the accuracy of the information rests with me.
Appl	Manuel Baumun Mayer 12/22/05 Date
Wat	ter Purveyor

Date

e are returning your application for the	e following reaso	on(s):					
Examination fee was not enclosed				APPLICANT PLEASE RETURN TO CASHIER, PO BOX 5128, LACEY, WA 98509-5128			
Section number(s)incomplete				APPLICANT PLEASE RETURN TO THE APPROPRIATE REGIONAL OFFICE			
xplanation:		The state of the second				-	
lease provide the additional informatio	-		ır applici	ation by			
					_		
ology staff		Date					

Use this page to continue your answers to any questions on the application. Please indicate section

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To receive this document in alternative format, contact the Water Resources Program at (360) 407-6604 (Voice) or (360) 407-6006 (TDD).

number before answer.